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|---|-------------|--------------------------------------|--|----------|---|----------|--|-------------|--|----------|--|----------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) W9517-01 | | | | | | | | | | |
| In re Application of ROBERIE et al. | | | | | | | | | | | | |
| Application Number 09/901,939 | | Filed July 10, 2001 | | | | | | | | | | |
| For Gasoline Sulfur Reduction In Fluid Catalytic Cracking | | | | | | | | | | | | |
| Group Art Unit 1764 | | Examiner ARNOLD Jr., J. | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) (Fee Code 1251)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) (Fee Code 1252)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) (Fee Code 1253)</td><td style="text-align: right;">\$ 1,020.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) (Fee Code 1254)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) (Fee Code 1255)</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>07-1770</u></p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"><u>March 4, 2005</u> Date</div><div style="text-align: center;"> Signature <u>Beverly J. Artale</u> Typed or printed name</div></div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"><input type="checkbox"/> Total Of _____ forms are submitted.</div> | | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) (Fee Code 1251) | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) (Fee Code 1252) | \$ _____ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) (Fee Code 1253) | \$ 1,020.00 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) (Fee Code 1254) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) (Fee Code 1255) | \$ _____ |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) (Fee Code 1251) | \$ _____ | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) (Fee Code 1252) | \$ _____ | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) (Fee Code 1253) | \$ 1,020.00 | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) (Fee Code 1254) | \$ _____ | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) (Fee Code 1255) | \$ _____ | | | | | | | | | | | |

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